







WHAT WE DO?

We focus on providing medical relief, sustainable health-related development and risk reduction activities for vulnerable communities, in both crisis and non-crisis situations.

We provide emergency medical and humanitarian aid.

We carry out sustainable development by helping communities find ways to prepare and protect themselves in the event of natural disasters; by rebuilding and refurbishing hospitals and health clinics; and by providing health-related trainings and educational programs.

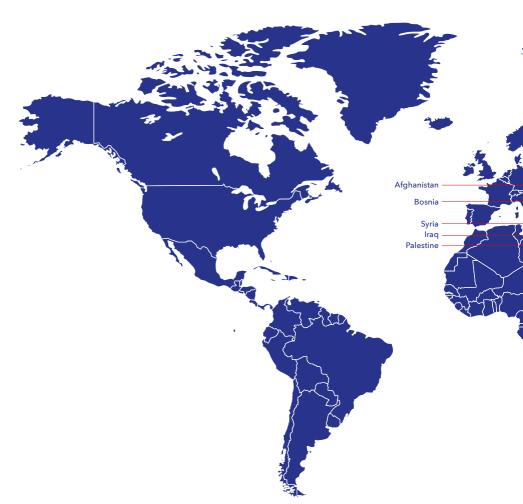
Our aim is to build resilience in all the communities that we touch.

Like many international organisations involved in the delivery of medical and humanitarian aid to vulnerable communities, MERCY Malaysia has been actively involved in providing emergency assistance to affected populations.

MERCY Malaysia began implementing its key domestic and international projects and programmes through Total Disaster Risk Management (TDRM) approach in 2005.

The TDRM approach is in line with the Hyogo Framework for Action (HFA), which was adopted by 168 countries at the 2005 UN World Conference on Disaster Reduction in Kobe, Japan.

MERCY Malaysia's commitment to TDRM highlights the importance of discovering a clearer understanding and response to disaster management while also addressing the root causes and underlying factors that lead to disasters.



1999 Kosovo Turkey 2000 Indonesia India 2001

Cambodia Afghanistan Cambodia Afghanistan Malaysia

2002

2003 Afghanistan

Sri Lanka Palestine Iraq Iran 2004

Indonesia Afghanistan Malaysia Sri Lanka Sudan North Korea Philippines 2005

Indonesia Afghanistan Malaysia Cambodia Pakistan 2006

Indonesia Afghanistan Malaysia Philippines Pakistan Maldives Lebanon 2007

Indonesia Afghanistan Malaysia Sudan Bangladesh Vietnam

OUR FOOTPRINTS



2008

Indonesia Afghanistan Malaysia India Cambodia Palestine Sudan North Korea Pakistan Maldives Bangladesh China Myanmar Yemen

2009

Indonesia Afghanistan Malaysia India Cambodia Sri Lanka Palestine Sudan Pakistan Maldives Bangladesh China Myanmar Philippines

2010

Indonesia Afghanistan Malaysia India Cambodia Sri Lanka Palestine Sudan Pakistan Maldives Bangladesh China Myanmar Chile

2011

Indonesia Afghanistan Malaysia India Cambodia Sri Lanka Palestine Sudan Pakistan Bangladesh China Myanmar Philippines Turkey Japan Libya Somalia Thailand Tunisia

2012

Indonesia Afghanistan Malaysia India Cambodia Sri Lanka Palestine Sudan Pakistan Philippines Bangladesh China Myanmar Japan Somalia Thailand Jordan

2013 Indonesia

Afghanistan Malaysia India Cambodia Sri Lanka Palestine Sudan Pakistan Philippines Bangladesh Lebanon Myanmar Japan Somalia Turkey Jordan

Syria

2014

Indonesia Afghanistan Malaysia Cambodia Sri Lanka Palestine Philippines Myanmar Somalia Iraq Syria Bosnia

2015

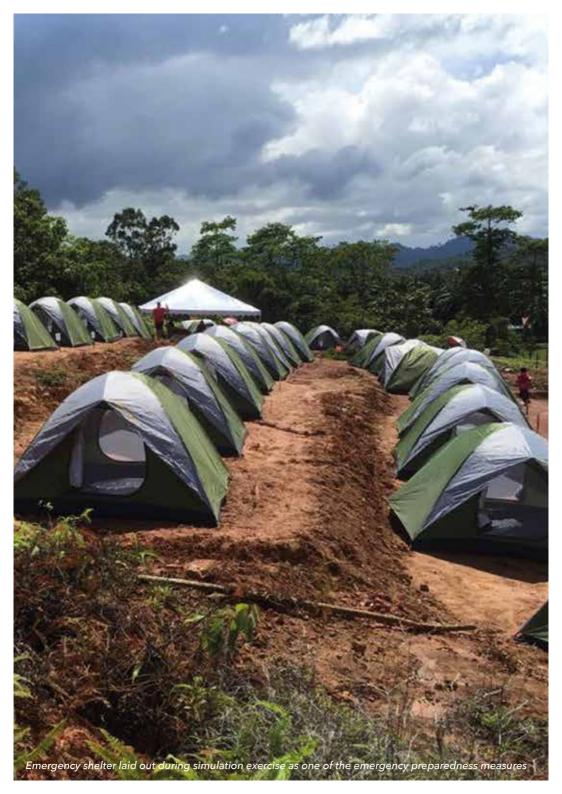
Indonesia Malaysia Afghanistan Malaysia Cambodia Palestine Philippines Myanmar Iraq Syria Bosnia Lebanon Jordan

Syria

Nepal

2016

Indonesia Ethopia Lebanon Jordan Palestine Myanmar Sierra Leone Philippines Nepal Bosnia



OUR RESPONSES



The generic TDRM approach



LOW RESILIENCY Less Preparedness = More Response and Recovery Needed



HIGH RESILIENCY
More Prepared =
Less Response /
Recovery Needed

By utilizing the Total Disaster Risk Management (TDRM) approach, we take a holistic approach to disaster by going beyond the emergency phase, taking into account mitigation and preparedness measures, in the event of the occurrence of another disaster. TDRM applies disaster risk management to all phases of the disaster management cycle emergency response, recovery, prevention/mitigation and preparedness/readiness. When responding to a disaster or a conflict situation, or during our stay afterwards to rebuild people's lives, we ensure that our beneficiaries come first.

Our aim is that all communities that we work with have high resilience towards a disaster. High resiliency will enable communities to bounce back faster after a disaster effectively reducing the impact of disasters to their livelihood during response and recovery phase. The TDRM approach is in line with the Hyogo Framework for Action (HFA), which was adopted by 168 countries at the 2005 UN World Conference on Disaster Reduction in Kobe, Japan.



HEALTHCARE

MERCY Malaysia is medical relief organization providing health, medical assistance and programmes in both crisis and non - crisis situation. The main goal is to contribute in ensuring communities worldwide access to medical care at all times and under any situations.

Our programmes are divided into two types according to the situation of the communities at a particular time. Our short term health programmes are usually organized during the emergency and early recovery phase. Meanwhile, our mid term and long - term health programmes are usually organized during the mitigation and development phase.







Field Hospital

MERCY Malaysia has long been involved in rapid emergency medical response during the acute emergency phase of disasters and complex emergencies. Our Field Hospital entails 5 modules namely the (1) Triage; (2) Surgery; (3) Outpatient Department; (4) Ward; and (5) Pharmacy. It is a fully functional Level 1 hospital with surgical capacity when fully deployed.

MERCY Malaysia has successfully deployed the Field Hospital in three countries in the past 8 years and has served more than 15,000 people through it. The Field Hospital is MERCY Malaysia's immediate and rapid response for an acute emergency. The Field Hospital is prepositioned at the United Nations Humanitarian Response Depot (UNHRD) in Subang, Malaysia.

Primary Healthcare and Dental Services

MERCY Malaysia provides primary healthcare services during both emergency and recovery phase as well as during development phase. The primary healthcare services are usually provided through mobile clinics and static clinics that are strategically organized to serve vulnerable communities and the underprivileged.

During emergency and early recovery phase, MERCY Malaysia provides mobile clinics to affected communities in ensuring access to healthcare during the acute phase. The mobile clinics usually feed into the referral system of the area that we work in to guarantee coordinated health services provision.

MERCY Malaysia also provides primary healthcare and dental services to communities that do not have access to the services on a regular basis. These are usually communities that are in remote areas. Medication is given free of charge, and visits are provided regularly to ensure continuity of service and follow-ups.







In times of disaster, the mental health of the affected population may not be seen as immediate need if compared with physical injuries. However, traumatised survivors need emotional support and guidance in the aftermath of a disaster. MERCY Malaysia assists by providing psychosocial intervention through programmes such as Psychosocial First Aid (PFA), Child Friendly Space (CFS) and Women Friendly Space (WFS) during the crisis situation. For longer term and sustainable approach, MERCY Malaysia provides training for community members and community service providers in mental health issues as well as through Training of Trainers (TOT) programmes in subjects such as PFA, CFS and WFS.



Provision of Medical Assets, Equipment and Supplies

MERCY Malaysia also provides assets to health facilities in vulnerable communities and communities affected by crises. The assets, equipment and supplies are donated to ensure access to healthcare services is sustainable and can be received locally. Close coordination is essential to enable the health facilities to fully utilize the donated items. Training programmes are usually organized for the service providers with the necessary skills.



Capacity Building

Capacity Building is MERCY Malaysia's long term approach towards sustainable effective and efficient health services provision to the communities that we work in. Trainings in health and medical services provision are provided to health service providers. The trainings usually address the most important and critical medical need in the health facility and community. A thorough assessment is conducted to identify this need.



Public Health Education

MERCY Malaysia also sees the importance in providing assistance in public health to the community. Health education is provided both during crisis and non crisis situation. The education is provided to raise awareness on healthy lifestyle that can affect the overall health status of the community.





Mother and Child Health Services

Women and children are the most vulnerable groups in displaced communities and especially in remote areas. MERCY Malaysia ensures that proper healthcare is provided to these groups of population.

Reproductive health services are provided through mobile clinics or community engagement to ensure access to women especially to expecting mothers on prenatal care as well as antenatal care. We also provide capacity building for midwives and health service providers on maternal care for sustainable access to maternal healthcare in the communities.

Nutrition status of children is usually affected during a crisis or due to poverty. MERCY Malaysia usually provides a mid – term solution to the problem through Supplementary Feeding Programme which provides supply of nutritious food to children in vulnerable communities as well as education to mothers and caretakers on sustainable food options and nutrition care.

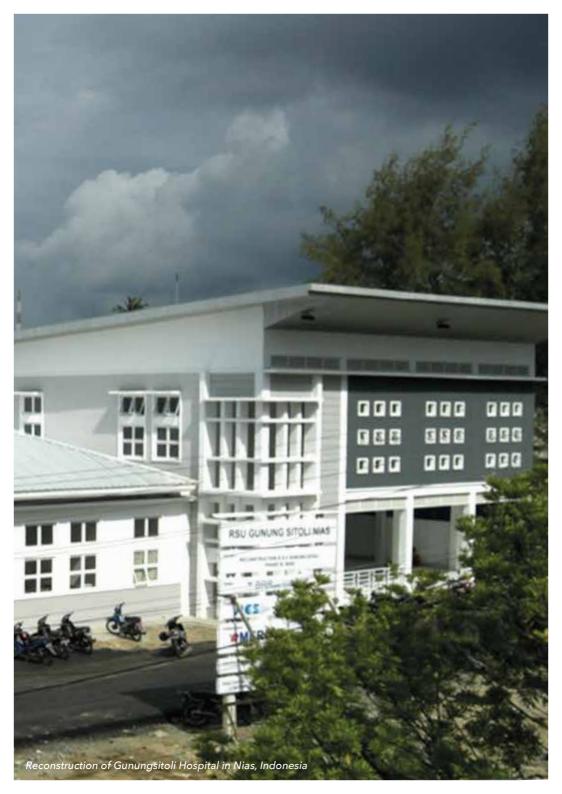
At the same time, MERCY Malaysia also provides immunization services to children in communities that do not have free access to the services. We believe that prevention is better than cure and therefore encourage proactive measures to healthcare through vaccination.



Medical Specialist Services

MERCY Malaysia has a ready pool of medical and health specialists from all fields of medical sectors as our volunteers. MERCY Malaysia provides lifesaving and specialized medical services during emergency and early recovery phase through the Field Hospital and also through placement in hospitals affected by a crisis.

In the long term, MERCY Malaysia provides capacity building programmes that include specific trainings and practical placements to the health service providers in the affected area as part of its knowledge transfer for local actors.



RECONSTRUCTION AND REHABILITATION

MERCY Malaysia is an NGO that believes in the concept of Building Back Better. Therefore in the recovery and mitigation phase, MERCY Malaysia is usually involved in rehabilitation and reconstruction of community buildings such as health facilities, community centres and schools. MERCY Malaysia has a pool of volunteers specializing in technical capacities for construction such as architects, engineers, quantity surveyors and project managers that are able to consult and manage the reconstruction and rehabilitation projects effectively.





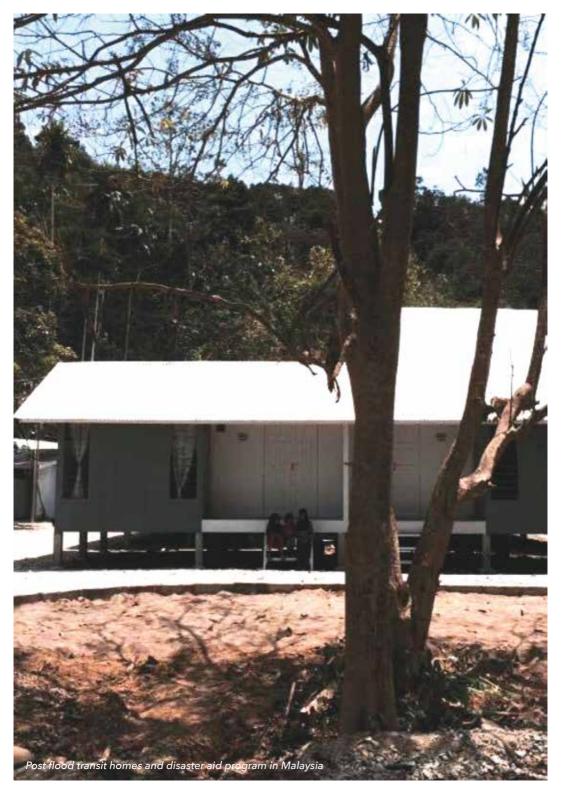
Health Facilities

MERCY Malaysia rehabilitates and reconstruct health facilities such as rural health unit, health centres as well as hospitals to ensure access to health services are restored immediately after a disaster. MERCY Malaysia have rehabilitated and reconstructed health facilities after disasters in countries such as Indonesia, Philippines, Myanmar, Bosnia, Pakistan and Afghanistan.

Community Buildings

MERCY Malaysia also rehabilitate and reconstruct community buildings such as community halls and schools that are damaged due to a disaster. This is due to the importance of these structure in these communities to enable the community to bounce back faster after a disaster.





SHELTER

During Emergency and Early Recovery phase, MERCY Malaysia provides shelter assistance to affected communities. The assistance provided can enhance their living standards during the phase and enable them to recover more quickly.





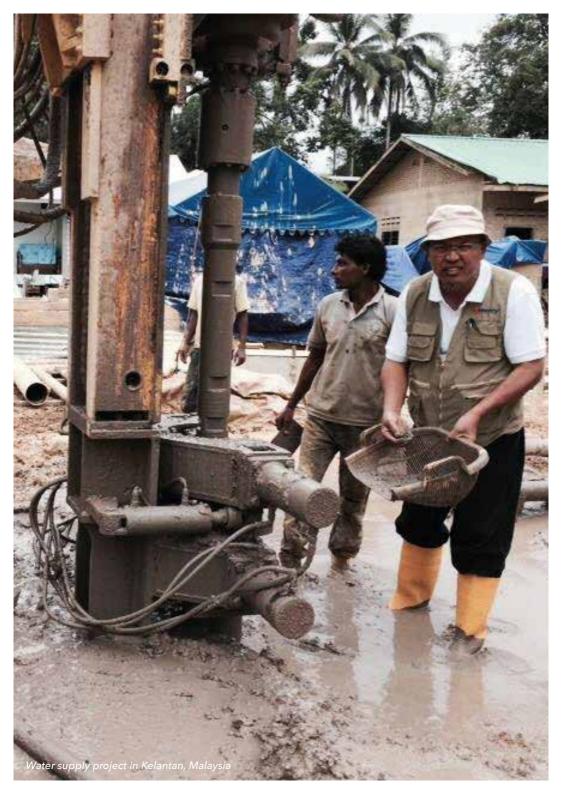
Temporary Shelter

Houses can be totally damaged due to natural disasters and conflicts. MERCY Malaysia provides temporary shelter as an early recovery measure to enable communities to have a more comfortable and dignified living space while waiting for their permanent homes. There is usually a big lag in time for communities to rebuild their permanent houses after a disaster. The temporary shelters become the temporary solution for houses. MERCY Malaysia has built temporary houses in Indonesia, Malaysia, Nepal and Palestine. The design for the shelters are unique according to the local customs and environment. As an international NGO, MERCY Malaysia adopts the Sphere minimum standards and ensures that the shelters have a localized designs with respect to the minimum standards.

Shelter Repair Kit

MERCY Malaysia also provides Shelter Repair Kit which consists of building materials and construction tools to families with houses that were damaged due to a disaster. The content of the shelter repair kit are designed according to the local customs with respect to international standards to ensure full acceptance from the communities. To date, MERCY Malaysia have distributed Shelter Repair Kits to communities in Philippines and Malaysia.





WATER, SANITATION, AND HYGIENE (WASH)

Besides healthcare, MERCY Malaysia also focuses on Water, Sanitation, and Hygiene (WASH) in its humanitarian relief operations.





Water Supply

A range of safe water provision strategies were employed in MERCY Malaysia operations worldwide. MERCY Malaysia has provided communities with access to clean water supply through activities such as boring of water wells, installation of hand pumps and chlorination of water. These activities were done in communities affected by both natural disasters and complex emergencies. Some of the countries MERCY Malaysia works in are Malaysia, Pakistan, Indonesia, Bangladesh, Myanmar, Philippines and in complex/conflict areas such as Sudan, Palestine and Sri Lanka.

Sanitation Facilities

MERCY Malaysia also provides sanitation facilities to communities affected by disasters as well as communities in remote areas. During emergency and early recovery phase, MERCY Malaysia provides temporary latrines to enable communities access to proper sanitation facilities during the transition from emergency and recovery situation.

Hygiene Promotion

Hygiene promotion is promoted especially during emergency phase. MERCY Malaysia distributes hygiene kits to communities affected by disasters to ensure basic hygiene practices are observed by each member of the community. MERCY Malaysia distributed standard items in its hygiene kits are to all countries it works in. However, certain items are usually added or replaced to respect the culture of the area that it is being distributed.

Additionally, MERCY Malaysia provides hygiene awareness education during the distribution of hygiene kits to ensure that the community is using the items in the most effective and efficient manner and to instil the importance of good hygiene practice amongst community members.



BUILDING RESILIENT COMMUNITIES



COMMUNITY-BASED DISASTER RISK MANAGEMENT



SCHOOL PREPAREDNESS PROGRAMS



RESILIENT HOSPITAL



PRIVATE SECTORS



LOCAL GOVERNMENT UNITS

Building Resilient Communities

'Resiliency' is a relatively new term that is designed to go further than 'sustainability' by pushing the transformational aspects of the changes needed within nations, places and communities to adapt to the long-term challenges facing the planet such as climate change, disasters, calamity and resource scarcities. Sustainability is still a powerful word in application as it enables us to focus on holistic, synergistic solutions that integrate economic, social and environmental outcomes. Nevertheless, the ambitious goal agreed to in Hyogo (2005) and in Sendai (2015) to substantially reduce disaster loses will need more than just integrated solutions - it will require the fundamental transformation of places and communities.

Building Resilient Communities (BRC) is a holistic approach that includes all levels of stakeholders in a community to increase capacity and capability by identifying and reducing vulnerability with the objective of building the community's resilience in social well-being and equity, environmental stewardship, and economic prosperity and continuity.

In achieving a culture of resilience, it is however not enough if only few of the civil society organizations, humanitarian actors and local government actors have disaster risk reduction and adaptation included as an inherent part of their work. Therefore, MERCY Malaysia's BRCprogram was developed as a way to engaged various stakeholders in a spherical and dynamic manner in addressing and responding to issues, ideas and actions that would help in increasing communities' and places resiliency. Its strategic goals are:

- 1. The integration of disaster risk reduction into sustainable development policies and planning;
- 2. Development and strengthening of institutions, mechanisms and capacities to build resilience to hazards; and
- 3. The systematic incorporation of risk reduction approaches into the implementation of emergency preparedness, response and recovery programs.







Volunteer With Us

Volunteers are the backbone of MERCY Malaysia. We are proud to work with individuals that go beyond the call of duty to contribute their time and expertise to assist us in continuing our humanitarian work. We are constantly looking for volunteers who have the passion, drive and professionalism while supporting our humanitarian efforts. If you have what it takes to be a MERCY Malaysia volunteer, follow the steps below, and should you have any enquiries do email to vmd@mercy.org.my

MEDICAL VOLUNTEERS

General practitioners; Anaesthesiologists; Cardiologists; Surgeons; Gynaecologists; Cardiologists; Paediatricians; Psychiatrists; Dentists; Dental surgery assistants; Nurses; Midwives.

TECHNICAL TEAM VOLUNTEERS

Architects; Planners; Quantity surveyors; Engineers; Draughstmen; Safety and health officers; Water specialists.

COMMUNICATIONS

Designers; Writers; Photographers; Videographers; Editors; Multimedia specialists.

LOGISTICS

Warehouse management; Emergency response; Administrative supports.

FUNDRAISING

Event organizers; Fundraisers.

DISASTER RISK REDUCTION/ BUILDING RESILIENT COMMUNITIES

Trainers; Teachers; Tutors; Lecturers; Counsellors.

To ensure independence and impartiality, MERCY Malaysia also relies on donations from the general public for financial support. A portion of our income is obtained from institutional donors, individual government grants and other international organizations, provided on a project basis. MERCY Malaysia spends 80% of its income in carrying out its relief operations and supports.

GET INVOLVED



How Can You Donate?

1. MAKE A MONTHLY PLEDGE

Pledge a minimum of RM 30 a month by credit/debit card or online banking through www.seringgitsehari.org.my

2. ADOPT A DONATION TIN

You can adopt one of our donation tins and place it in your community.

3. DONATE THROUGH MERCY MALAYSIA HUMANITARIAN FUND THROUGH

a. Bank Name: CIMB

Account Name: MERCY Malaysia Account Number: 8000-7929-08 SWIFT Code: CIBBMYKL

b. Bank Name: Maybank

Account Name: MERCY HUMANITARIAN FUND

Account Number: 5621-7950-4126 SWIFT Code: MBBEMYKL

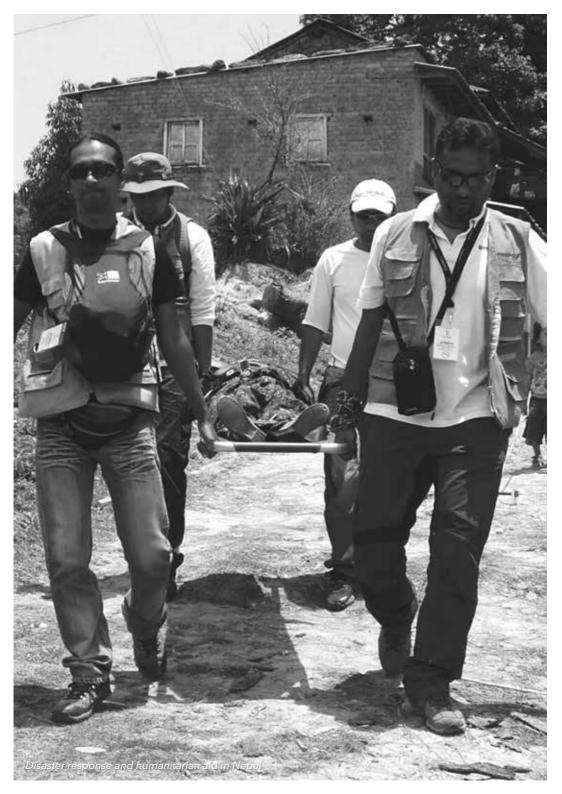
4. CORPORATE DONATION

Apart from individual donations, we welcome financial contributions and support from corporate donors. You can also work with your management to participate in our *Payroll Giving Program*.

5. ORGANIZE A DONATION DRIVE

You can organize a local event at your place and donate the proceeds to MERCY Malaysia.

For more information, please contact our Fundraising Department at +6 03 7733 5920 or email to fre@mercy.org.my



MILESTONES











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